STATE OF SOUTH DAKOTA

Statement of Legal Newspaper Ownership and Circulation

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Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER THE WOLSEY NEWS		2. DATE 09-28-2004
3. FREQUENCY OF ISSUE WEEKLY	3A. NO. OF ISSUES PUBLISHED ANNUALLY 50	3B. ANNUAL SUBSCRIPTION PRICE $ 16.00/$19.50
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers) PO BOX 307, WOLSEY, SD 57384		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers) PO BOX 196, MILLER SD 57362		
6. FULL NAME OF PUBLISHER: GARY MCFARLANE		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.		
FULL NAME: MILLER PUBLISHING COMPANY, INC	COMPLETE MAILING ADDRESS: PO BOX 196, MILLER, SD 57362	
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form. NONE		

9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run)	300	300
B. PAID AND/OR REQUESTED CIRCULATION 1. Sales through dealers and carriers, street vendors and counter sales.	24	39
2. Mail Subscription (Paid and or requested)	226	221
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)	250	260
D. FREE DISTRIBUTION 1. BY MAIL, CARRIER OR OTHER MEANS	6	0
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	10	10
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	266	270
F. COPIES NOT DISTRIBUTED 1. Office use, left over, unaccounted, spoiled after printing	18	29
2. Return from News Agents	16	1
G. TOTAL (Sum of E, F1 and F2 – Should equal net press run shown in A)	300	300

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public

I swear that the statements made by me are true, correct, and complete:

Gary L McFarlane
(Signature)

PUBLISHER
(Title)

State of South Dakota)
§
County of BEADLE)

Sworn to before me this 30 day of Sept, 2004

DeAnn M Hargens
Notary Public

My commission expires: 5-19-06

(Seal)

DeAnn M. Hargens
SEAL NOTARY PUBLIC SOUTH DAKOTA SEAL

Form: SOS REC 051 7/2004

MILLER PUBLISHIG COMPANY, INC. LIST OF STOCKHOLDERS

GARY MCFARLANE, PO BOX 123, MILLER, SD 57362

PAULA MCFARLANE, PO BOX 123, MILLER, SD 57362